

ATTESTATION PAPER.

No. 725-147

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRIPPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Forrest*
- 1a. What are your Christian names?..... *John Russell*
- 1b. What is your present address?..... *Woodville Ont*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Maniposa Tp. Victoria Co*
- 3. What is the name of your next-of-kin?..... *David Forrest*
- 4. What is the address of your next-of-kin?..... *Rm 3 Woodville Ont*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *March 28th 1893*
- 6. What is your Trade or Calling?..... *Farmer*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?.. *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the } *Yes*
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John Russell Forrest*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Russell Forrest (Signature of Recruit)

Date *January 7th 1916*. *Gen Hall* (Signature of Witness)
Supt

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Russell Forrest*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Russell Forrest (Signature of Recruit)

Date *January 7th 1916*. *Gen Hall* (Signature of Witness)
Supt

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Woodville* this *seventh* day of *January*, 191*6*.

William Mc Kee (Signature of Justice)

Description of John Russell Forrest on Enlistment.

Apparent Age 22 years months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 4³/8 ins.

None.

Chest measurement. { Girth when fully expanded..... 34⁴/4 ins.
 Range of expansion..... 3³/4 ins.

Complexion Dark

Eyes Brown

Hair Dark Brown

Religious denominations. { Church of England.....
 Presbyterian..... Presby
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic.....
 Jewish.....
 Other denominations.....
(Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date..... Jan. 7 1916.

J. M. Culloch
 Medical Officer. Capt.

Place..... Woodville

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

John Russell Forrest having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

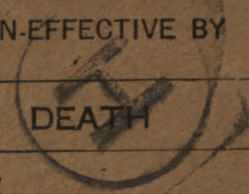
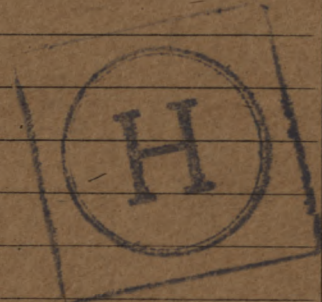
[Signature] Lt. Col. (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Date..... JAN 15 1916 191

REGIMENTAL DOCUMENTS

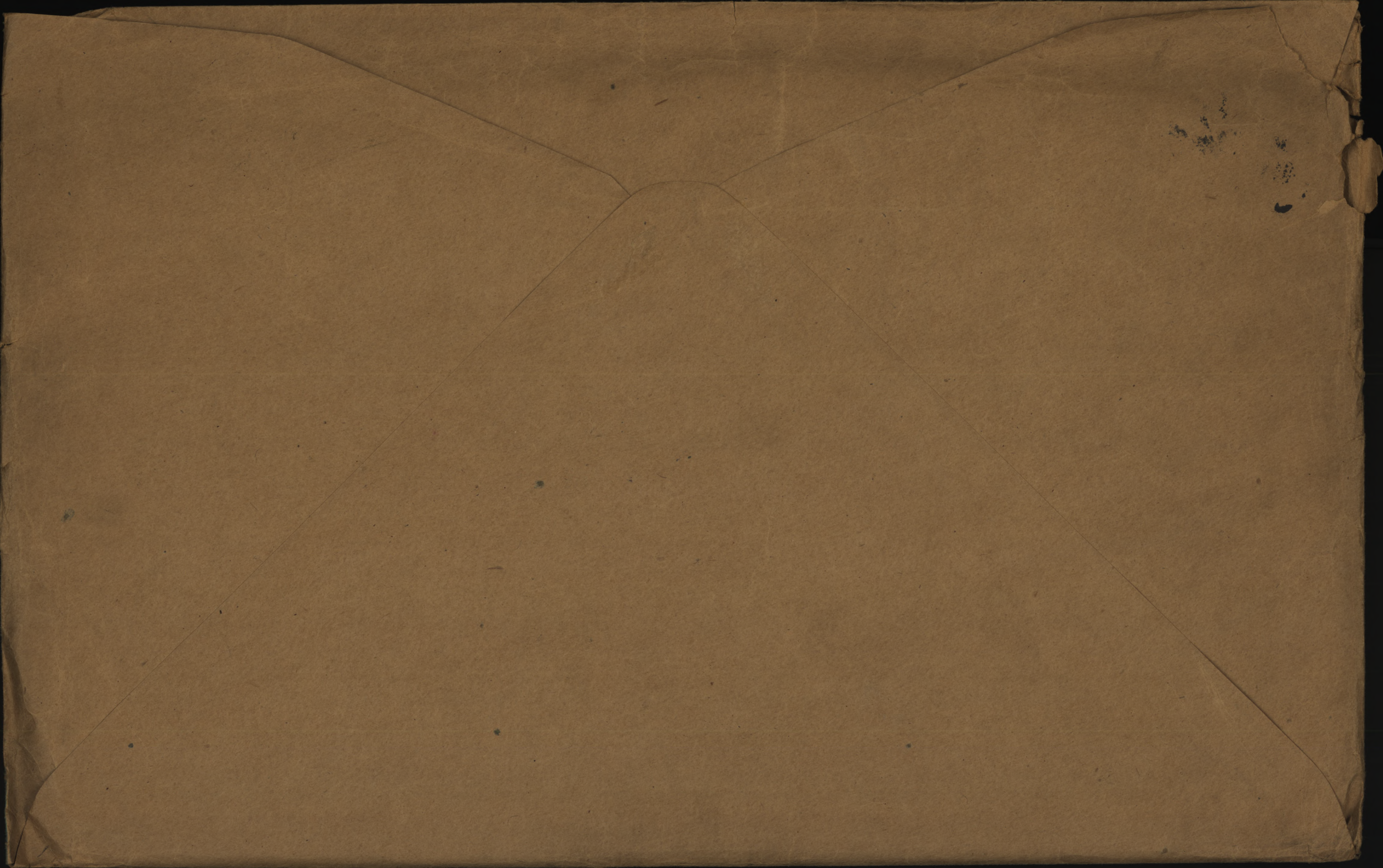
NAME FORREST, JOHN RUSSELL, (A/Sgt) REGT. NO. 225747 UNIT 109th Bn H. Q. FILE NO. _____

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTENDANCE PAPER (M.F.W. 23, 133, or 51)					DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				13531	Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demob</i>
1 MEDICAL EXAMINATION (M.F.W. 129)					
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>1 Susp Cert</i>				<i>6-11</i>	
<i>1 Susp Cert for Demob</i>				<i>6-11</i>	
<i>MFW 67</i>				<i>12-11</i>	
<i>Pass Book</i>					
<i>R 122</i>					
<i>Pay Book</i>					
				<i>405134</i>	



Demob

405134



6

DUPLICATE

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....

109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number..... **725147**

(3) Full Name of Soldier..... ~~John Russell Forest~~ **John Russell Forest**

(4) Place of Birth..... **Woodville, Ontario, Canada**

(5) Are you married, or not?..... **No**

(6) If married, state,
(a) Full name of your wife..... **N11**

(b) Present Postal Address..... **N11**

(7) Are you a widower?..... **No**

(8) Have you any children?..... **N11**

If so, give number of boys and girls..... **N11**

Also their names and ages..... **N11**

(9) Is your Father alive?.....Yes.....

If so, state name and address.....David Forest, Woodville, R.R.No. 2, Ontario, Canada.....

(10) Is your Mother alive?.....Yes.....

If so, state name and address.....Mary Forest, R.R.No. 2 Woodville, Ontario, Canada.....

(11) If your Mother is a widow.....No.....

Are you her sole support, or not?.....Nil.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....Nil.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....Nil.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

.....Nil.....

(15) Are you insured?.....No.....

If so, in what Company?.....Nil.....

Have you made arrangements for payment of your Insurance premium.....Nil.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date.....5th July 1916.....

.....[Signature]..... Lt. Col.
Officer Commanding.
C. C. 109th Overseas Battalion, C. E. F.

705147

ORIGINAL MEDICAL HISTORY SHEET.

Surname Forrest Christian Name John Russell

Examined { on 4th day of January 1916.
 at Woodville
 Birthplace { City or Town Marposa Sp.
 County Victoria

Approved by
J. McCulloch Capt.
J. McCulloch Medical Officer
 Rank 109th Overseas Battalion, M.O. E. F.

Apparent age 22 years
 Trade or occupation farmer
 Height 5 Feet 4 3/8 Inches.
 Weight 122 Lbs.
 Chest measurement { Minimum 30 1/2 inches.
 Maximum expansion 34 1/4 inches.
 Physical development good
 Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right none Left one
 Number one
 When Vaccinated last Feb. 19th 1916
 (a) Marks indicating congenital peculiarities or previous disease none

Date	Result	VACCINATIONS.
19-2-16	Good	<i>J. McCulloch</i> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection
none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
9/5/16	Good	<i>J. McCulloch</i> M.O.
15.5.16	"	<i>J. McCulloch</i> M.O.
24.5.16	"	<i>J. McCulloch</i> M.O.
7.9.16	"	<i>W. B. ...</i> M.O.

Enlisted on 7th day of January 1916 at Woodville Ont.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn</u>	<u>725147</u>		<u>7-1-16</u>
Transferred to	<u>21st Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

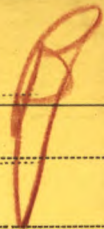
N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

6 con. Opl
22 Mr Pres

Imp
R

Number 725147

Rank Cpl



Surname FORREST

Christian Name John Russell

Units 20th B.C. Inf Theatre of War France

Date of Service 6-10-16

Remarks

Latest Address ~~Woodville~~ 353, St Nicholas St
Ont Montreal que

Roll No. B Page 17052

200m. 2-21. n.

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued.....

Yes
No

Date.....

Character on
discharge.....

Previous occupation.....

Date and place of
enlistment.....

Diagnosis.....

Date of Medical
Boards.....

Date.....

Remarks.....

DESP. NOV 10 1928

REGN. NO. 40844

* Name will be given in full; surname first.

NAME *Forrest J. W.*

H. Q. FILE No. 649-

REG'TL. No. *425147*

RANK AND CORPS *Pte 109th Batt*

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

12	Mil Isolation Aldershot	3-9-16	Parotiditis
16	" " "	18-9-16	(") Disch.

SURNAME.

Farrest M.M.

2

CARD NO.

CHRISTIAN NAMES

John Russell
23.30768

FOLL.

REGL. NO.

725947

RANK

Pte.

UNIT

109th.

Batt.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Farrest Haved.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

R. M. H. No. 3 Woodville, Ont.

COUNTRY OF BIRTH

Canada Mariposa Twp. Victoria, Ont.

DATE

March 28th 1893

PLACE OF ATTESTATION

Woodville.

DATE

Jan. 7th. 1916.

o/s. 23. 7. 16. ⁴⁸⁸/₁₄

At 18. 3. 19 ²⁸⁴/₂₀ Sgt.

Sailed From Halifax Rev. S.S. Olympic 23/7/16

MARRIED

SINGLE Yes.

WIDOWER

TRADE OR CALLING

Farmer.

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

22.

YEARS

0.

MONTHS

HEIGHT

5.

FEET

2 3/8

INCHES

CHEST MEASUREMENT

34 1/4.

INCHES

EXPANSION

3 3/4.

INCHES

COMPLEXION

Dark.

EYES

Brown.

HAIR

W. Brown.

DISTINGUISHING MARKS

None.

MEDICAL EXAMINATION.

PLACE

Woodville.

DATE

Jan. 7th 1916.

No. 725147. RANK

1st
Lt
Corpl.

NAME

Forest J. P.

T. O. S. 7-1-16

UNIT

109th. Battalion.

D. O. 45-12-1-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan 7.	1916. Jan. 31	✓		
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓	Promo. 2nd Corpl. - 10-6-16.	D. O. 175 of 12-6-16.

UNIT SAILED

JUL 23 1916



PREMIARY HOSPITAL TREATMENT

Surname

Christian Name or Names

Reg. No.

Forrest.

J.R.

425147

Rank

Unit

Co.

Troop

Batty

Pte.

109th Bn.

Hospital

Date of Admission

Transferred Aldershot Isolation Hosp. 3. 9. 16

Hosp.

Hosp.

Hosp.

Diagnosis

Parotiditis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis. 18. 9. 16 ^{Date}

REMARKS

Cl. 13. 9. 16. 17
Ch. 30. 9. 16 #16

A.M.D. 2 Dept.

Beh. of D.G.M.S. O.M.F.C. London

R

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

DEPARTMENT OF VETERANS' AFFAIRS

WAR VETERANS ALLOWANCE DISTRICT AUTHORITY

Address Montreal, P.Q.

The Public Archives Records Centre,
Tunney's Pasture,
Ottawa 3, Ontario.

MARK YOUR REPLY:

Attention: Reference Section.

For Attention of:

Re: FORREST John Russell
(Surname) (Christian Names)

Service No. 7251474

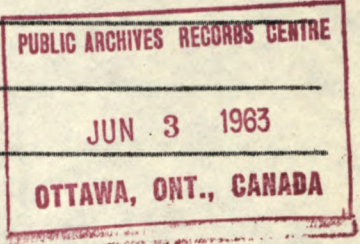
Veteran is stated to have served during S. African War () World War I (X)
* Service No. 725147 as per C.E.F. doc's.

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars concerning his service:

1. UNITS (including that of discharge) HIGHEST RANK IN UNIT:
- (a) 109BN. Prov. Cpl.
 - (b) 20BN. Pte.
 - (c) Edn Engrs Cpl. Sgt.
 - (d) ~~Edn Engrs~~ _____
 - (e) _____
 - (f) _____
- (if other than CEF please so designate following applicable unit)

2. THEATRES OF SERVICE

- (a) South African War
Date and port of embarkation _____
- (b) World War I - (if Canada only, state if with territorial limitations).
CANADA-BRITAIN-FRANCE
Date(s) embarked for U.K. _____
IF CANADA AND U.K. ONLY Date(s) disembarked in Canada from U.K. _____
Period(s) of desertion in U.K. _____



3. Any other military service. nil

4. Date and place of all enlistments. 7 Jan. 1916 - Woodville, Ont

5. Date of all discharges and reason. 21 Mar. 1919 - Demob.

6. Date and place of birth as per attestation paper. 28 Mar. 1893 - Manipisa Twp., Victoria Co., Ont

7. Marital status; if married, name in full of wife. Single

8. Religion. Pres.

9. Decorations, if any. M.M.

DEPARTMENT OF VETERANS AFFAIRS
CANADIAN VETERANS AFFAIRS DISTRICT AUTHORITY

Address

The Public Archives Records Centre,
1000 Avenue Parkway,
Ottawa, Ontario.

MARK YOUR REPORT

For Attention of:

Attention: Reference Section

Service No.

(Canadian Name)

(Surname)

Veteran is stated to have served during: () World War I ()

To enable this VETERANS AFFAIRS DISTRICT AUTHORITY to determine the
eligibility of the above named, will you kindly transmit the following particulars
concerning his service:

1. UNITS (including date of discharge) ()

(a)

(b)

(c)

(d)

(e)

() If other than one class of service ()

2. THEATRES OF SERVICE

() ()

Date and port of embarkation

() World War I - () Canada only () other than Canada ()

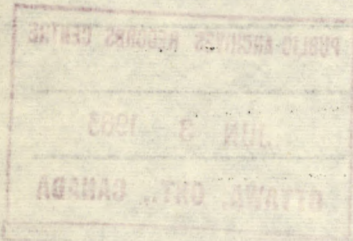
Date ()

DATE CANADA

DATE CANADA

U.S. ONLY

Period of service in U.K.



3. Any other military service

4. Date and place of all enlistments

5. Date of all discharges and reasons

6. Date and place of birth as per
attestation papers

7. A list of names if married,
name in full of wife

8. Religion

9. Decorations, if any

VVA 52

Head Reference Section

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 725147 Rank A1 Sgt Surname FORREST
(Given name in full)

Unit or Corps 1st CERB Birthplace JOHN RUSSELL Victoria Out Cay

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique good Weight 135^{est} lbs. Height 5 ft. 5 in. Colour of Eyes Brownish
 Nutrition good
 Pulse 70
 Condition of arteries good
 Vision Rt. 20/20 Left 20/20
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)

1. Vaccination
Small scar left side
dog bite

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System yes
 Disturbance of mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

2/9/16 Camp.
Typhoid - 11 years ago.
Bronchitis followed Typhoid
 Evidence of old Bronchitis at present
 clearing up. No disability at present.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at. Seaford (Overseas)

Date 20/2/119

Signed [Signature] M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature [Signature]

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at..... (Canada)

Date

Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

DISPERSAL CERTIFICATE.

1. Surname **FORREST** Christian Names **John Russell**
 Regtl. No. **725147** Rank { Temp..... Regt. or Corps **109**
 Acting **Sgt** Unit **CERB**

2. (a) Service Group **25**
 (b) Occupational Group **1**
 (c) Dispersal Area **9**

3. (a) Medical Category **A**
 (b) Railway Station to which proceeding on Dispersal **Toronto**
 (c) Post Office address in full **R.R.D. 2, Woodville Ont.**
 (d) P.O. or Bank in which soldier desires to have his Post discharge or deferred (if any) pay deposited **Standard Bank Woodville**

4. I certify:—

- (a) that I carry no ammunition ;
- (b) that all the information given above is correct to the best of my ability;
- (c) that I have completed a Questionnaire for the Department of Civil Re-Establishment.

Signature of O.C. *[Signature]* Signature of Soldier *J.P. Forrest Sgt*

Date **28.2.19** *Officer i/c Wing Discharge Office for O.C.M.D. Woodville*

NOTES.

1. Each alteration must be initialled by the O.C.
2. Forms will be clearly marked "Original," "Dup.," or "Trip." as the case may be.
3. All entries will be made in ink or type.
4. All information for Part 2 of form will be obtained in the case of Other Ranks, from Pay Books, and in the case of Officers from Record of Service Book (A.B. 439).
5. In every case Signature of O.C. and Soldier must be attached.
6. Soldiers' (duplicate) copy, together with Pay Book (A.B. 64) should be carried on the person, not in the kit.
7. In case of loss of Dispersal Certificate, soldier should report same to O.C. or Dispersal Draft Officer.

John Howell

WESTON

109

DEAR

188

WESTON

A

23

[Faint, illegible handwritten text]

[Faint, illegible handwritten text]

[Extremely faint and illegible handwritten text throughout the lower half of the page]

File

Fill in Only.—Unit, Number, Rank and Name.
Casualty Form—Active Service.

M. F. W. 54. (A. F. B. 103.)

250M.—1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 2514 Rank Private Name Forrest John Russell

Enlisted (a) 7.1.16 Terms of Service (a) 2 of W Service reckons from (a) 7.1.16

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }


Extended _____ Re-engaged _____ Qualification (b) Farmer

CERTIFIED CORRECT.
18 OCT. 1916
CAN. RECORDS, LONDON

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	
		Appointed <u>Pvt</u>	Quincy	5.8.16	Part II Order 218
		Transferred for Overseas Service with <u>20th Batt'n</u>		5 1916	D.O. Pt. 11 No. <u>279</u> Capt.
		Reverts to rank of <u>Pvt</u> on <u>1st</u> <u>Army</u> <u>Base</u> <u>Camp</u> in France.		6-10-16	NR <u>55511/10/16</u> (2-6-17)
6/10/16	C B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR 1
do	do	Left for	do	20/10/16	B213
27/10/16	20th Bn	Arrived	do	23/10/16	B213
10-2-17	do	Att to Light Rly Coy	do	17-2-17	B213
22-9-17	Cdn Corps	Left for <u>1st Army Base Camp</u>		22-9-17	<u>Adjutant</u>
6-10-17	do	Returned from		4-10-17	B213
20-10-17	20th Bn	Transferred to	CCRC	20-10-17	109TH BATTALION CAN. INFANTRY,
26-11-17	A A A	Trsf'd to Cdn Light Rly Operating Coy and Struck off strength 20th Bn acc'dly.		23-11-17	(Auth. A.G. A/54 (O.1)d/ 23-11-17. AAG Cdn Sect 18206 Pt 2 86D/30-11-17.
		T.O.S CDN, LIGHT RLY OPERATING CONSTRUCTION COMPANY			
				24.11.17	P.O. No 1.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
Date	From whom received				
5.1.18.	PC Unit	Granted 14 days leave to Paris	Tried	31.12.17	B 213 P ¹¹ O No 3 of Jan 1918.
19.1.18.		Rejoined from leave	"	14.1.18	B 213
11.2.18	W.O.	Designation of Unit changed to 1st Dragoon Coy C.F.			P ¹¹ O No 13 of Feb 1918
11/5/18	O.C. Unit	Promoted 2 nd Corporal - Field		11/5/18	B 213 Pt 2 ho 39. May 1918
5/7/18	' DO	With Unit		5/7/18	K.G. 18/14254
24 6/18	London Gazette	Awarded the Military Medal.			ho 30768 4 th Supplement of 27 th June 1918 Pt 2 ho 61 of August 1918.
2/11/18	1 st Dragoon Coy C.F.	Promoted Corporal.		28/10/18	B 213. Pt 2 ho 85. of 1918.
4/12/18	do	Granted 14 days leave to W.K.		4/12/18	B 213. Pt. ho 90. of Dec 1918
21/12/18	do	Rejoined from leave		21/12/18	B 213
27-1-19	C 2 B D	Sold to Eng for purpose of Demob. & sent to C.E.R.W. Staforth		28-1-19	W.E. 9. D. O. B. of 1919.
17-2-19	ICERD	T.O.S from 1st Dragoon Coy	Kept	27. 19	O.T. 21. 40


 Lieut. for Lieut. A. A. G.
 Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103-I.
Part I.

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation Form or Record of Service paper) (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regt. No.
--	-----------------------	---------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d) (Authority) (date)	Initials and Rank of an Officer.
--	---	----------------------------------

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date). Second Occupation Card despatched on (date)

(17) Next of Kin	(18) Demobilizer (f)	(Place)	(Signature of Posting Officer)
(19) Pivotal-man (f)	(20) Qualifications (g)	(Date)	
		or (21) Corps trade and rate	
(22) Extended }		(23) Re-engaged }	
(24) Miscellaneous entries:—			

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoemaking, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 IM 5/18 G.W.P.Co.(3490)

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					

18-2-19	ICERS	S.O.S. to HQ Wing No 2 Kimmel Park			Sept 18-2-19 Part II Ord 41	
---------	-------	---------------------------------------	--	--	-----------------------------	--

Mannings
..... Lieut. C.E.
for Lieut. Colonel, C.E.
Commanding Canadian Engineers Reserve Bn.

Attached C.O.O. Kimmel Park for
return to Canada Part II Orders
No. 65 Ceaser to be attached
C.O.O. Kimmel Park on embark-
ing for Canada, Part II Order
No. 65 18-3-19

Quelch Commanding 2 Wing,
Kimmel Park Camp.

H. M. T. 'CELTIC'
EMBKD. LVP L MAR. 10. 1919

MAR 10 1919 O.S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO. 1919 PART II D. O. 88
21 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 88

W.C. Roberts Lieut.
For O. C. No. 2 District Depot.

Nothing to be written in this margin.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) FORREST D.

REGIMENT 1ST CERB RANK A-Sgt No. 725143

Date of Examination in England 14/2/19 Date of Examination in France _____

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 18, 21
2. EXTRACTIONS 12
3. CROWNS
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

Nil.

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England
- (c) In France

Signature of Dental Officer _____

[Signature] Capt
C. A. D. C.



Faint, illegible handwriting at the top of the page.



Mil



Faint, illegible text or markings on the right side of the page.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian name John Russell 2. Surname Terrest
- 3. Rank alsqn 4. Original Unit 109th Bn. 5. Reg. No. 725147
- 6. Address, in full, to which future payments of gratuity are to be forwarded.....
Mrs. D. Terrest
Woodville. Ont
- 7. Date of enlistment in the C.E.F. 7th Jan/16
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs. D. Terrest
- 9. Relationship of such dependent Wife
- 10. Address, in full, of such dependent Same
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
.....
.....
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.....
.....
.....
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served.....
.....
.....
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

18. Have you had more than one enlistment? If *no* give particulars of discharges and re-enlistments and under what regimental numbers and units.
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *no*
20. Have you been issued with a War Service Badge? If so what class?
21. Have you, during the present war, served in the Imperial Forces?
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?
- (b) If so, was such reversion in consequence of misconduct or inefficiency?
24. Are you now serving in the C.E.F.?
- MAR 21 1919* (a) Date of discharge
- (b) Reason for discharge
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?
- (b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *J. R. Forrest. Sgt*

Place of Residence: *Woodville Ont. R.C.S. Rhyb.*

Declared before me at:

This *12th* day of *March* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

J. McLean
Major

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.



RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES

THIS REPORT IS NOT VALID WITHOUT THE IMPRINT OF THE OFFICIAL STAMP OF THE DEPARTMENT

Service Rank and/or Number..... **725147** Name..... **John Russell FORREST, M.M.**

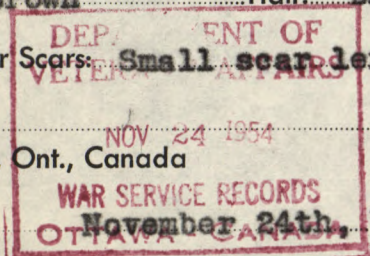
- 1. Branch of Service: **CANADIAN EXPEDITIONARY FORCE**
- 2. Date and Place of Birth: **28th March, 1893. Mariposa Tp., Victoria, Ont.**
- 3. Date and Place of Appointment, Enlistment or Enrolment: **7th January, 1916. Woodville, Ont.**
- 4. Unit on Appointment, Enlistment, or Enrolment: **109th Battalion**
- 5. Theatres of Service: **CANADA - ENGLAND - FRANCE**
- 6. Date and Place of Retirement or Discharge: **21st March, 1919. Toronto, Ontario.**
- 7. Reason for Retirement or Discharge: **"Demobilization"**
- 8. Rank on Retirement or Discharge: **Sergeant**
- 9. Medals and Decorations: **MILITARY MEDAL - BRITISH WAR & VICTORY MEDALS.**
- 10. Remarks: **Nil**

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: **Male** Age: **25** Years..... **11** Months. Height: **5** Feet..... **5** Inches.
Eyes: **Brown** Hair: **Dark-Brown** Complexion: **Dark**

Marks or Scars: **Small scar left side.**

Ottawa, Ont., Canada
WAR SERVICE RECORDS
November 24th, 1954.



[Signature]
Director, War Service Records

RECORD OF SERVICE

CANADIAN ARMED FORCES

1. Name of member: _____

2. Date of birth: _____

3. Date of entry into service: _____

4. Date of discharge: _____

5. Branch of service: _____

6. Rank at discharge: _____

7. Name of commanding officer at discharge: _____

8. Name of hospital or institution: _____

9. Name of physician: _____

10. Name of dentist: _____

11. Name of optician: _____

12. Name of pharmacist: _____

13. Name of other medical personnel: _____

14. Name of other personnel: _____

15. Name of other personnel: _____

16. Name of other personnel: _____

17. Name of other personnel: _____

18. Name of other personnel: _____

19. Name of other personnel: _____

20. Name of other personnel: _____

DISCHARGE AT TIME OF RETIREMENT OR DISCHARGE

21. Name of member: _____

22. Date of birth: _____

23. Date of entry into service: _____

24. Date of discharge: _____

25. Branch of service: _____

26. Rank at discharge: _____

27. Name of commanding officer at discharge: _____

28. Name of hospital or institution: _____

29. Name of physician: _____

30. Name of dentist: _____

31. Name of optician: _____

32. Name of pharmacist: _____

33. Name of other medical personnel: _____

34. Name of other personnel: _____

35. Name of other personnel: _____

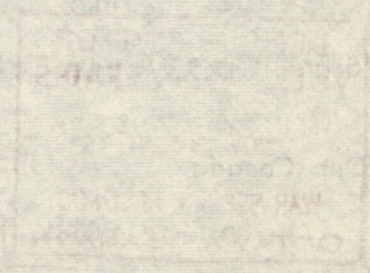
36. Name of other personnel: _____

37. Name of other personnel: _____

38. Name of other personnel: _____

39. Name of other personnel: _____

40. Name of other personnel: _____



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 725747 (Rank) Sergeant

Name (in full) John Russell Forest enlisted in

the 109 Battalion

CANADIAN EXPEDITIONARY FORCE at Woodville on the 7

day of January 1918

HE served in France and Belgium

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:

Age 25 years

Height 5 feet 5 inches

Complexion Wash

Eyes Brown

Hair Wash Brown

Marks or Scars

John R. Forest
Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
MAR 21 1919
TORONTO

John P. O'Connell
Issuing Officer

O.C. No. 2 District Depot.

Rank

Date MAR 21 1919 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

TLH Rank *Private* Name **FORREST, John Russell.** ✓ Reg'l No. **725147.** ✓
 Unit **109th. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.** ✓
 Place and Date of Enlistment **Woodville, Jany. 7th 1916.** ✓ Place of Birth **Mariposa Tp.** ✓
 Victoria Co.
 Name and Address, Next-of-Kin **David Forrest,** ✓
R.M.D. 3, Woodville, Ont. Canada. ✓ Relationship **Father.** ✓

*Ally
H2*

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N.P. 139-8353
 File No. 112 Sept.
 Category **CANOR**

Discharge, Date and Place Reason Character
 H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		Arrived in England per H. M. T. 2310		31-7-16	
5-8-16	O.C. 109 th	App'd Prov. Cpl	Oseney		Pt. II D.O. 276
13-9-16	109 th C.L.	Admitted to Hoop	Aldershot	3-9-16	C.L. #12 P.I. D.O. 276 P.I. D.O. 276 15-9-16
20-9-16	do	Dis from Isolation Hos. Aldershot	Byamskott	18-9-16	Pt. II D.O. 264
5-10-16	do	S.O.S. to 20 th Bn	do	5-10-16	Pt. II D.O. 279 J.W.C.
11-10-16	20 th Bn	J.O.S. from 109 th Bn	Field	6-10-16	" #55.
do.	do.	Reverts to rank of Private	do	do	do.
30-11-17	do	S.O.S. to Cdn. Light Rly. Operating Coy.	Pte. do	23-11-17	Pt. II D.O. 86
5-12-17	610RB	JOS from 20 th Bn	---	23-11-17	1.
		Now Known As			
		Ist. Tramways Coy C.E.			

A.F.B. 153 CHECKED
 15 OCT 1916

Date.	Report From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
22.5.18	1st Trm Corp	Promoted 2nd cpl	Field	Apr 11.5.18	PE 1140
3.8.18.	1st Trm Co	Awarded Military Medal.	"		PE 110.61 (L. Gaz 30) 68 4 th Supp dated 27 th 18
14-11-18	~"~	Promoted Corporal	"	2/cpl 28-10-18	pt 40085
5.2.19	200	lost to CERLO	"	28.1.19	1006 CERB 10040. 17.2.19
26.2.19	H. De B. W.	lost pend ret to Canada	H. De B. W.	18.2.19	DO 45. 1/16 2/18 4/18 8/19
18.2-19	H. De B. W.	lost to Canada 26	"	26.1. 10.3.19 10.0-19	10065

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.—4-16.
 H. Q. 1772-33-819.

To Whom *David Forrest,*

Address

*Woodville, RR# 3
 Ont.*

By Whom Assigned

*Forrest
 Forrest, J. R.*

Regtl. No.

725147

Rank

Pte.

Corps

109th Batt'n. "C Coy"

Rate

*\$20.⁰⁰**AUG 1 1916*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA	SEPARATION ALLOWANCE	ENGLAND or CANADA
EFFECTIVE DATE: 1/8/1916		EFFECTIVE DATE: -	
AMOUNT: 20 ⁰⁰		AMOUNT: -	

NAME: **FORREST, John Russell**

NUMBER: 725147

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mr David Forrest (Father)
R.M.D.
Woodville ^{Ontario} Ontario

Mr Mary McH Forrest (Mother)

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
BO. 55.	11/01/16	Private
" 40.	22/5/18	Promoted 2nd Corp.
55	14.11.18	" Cpl.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
18/1/19	2115	Trans.	7.46				
7-2-19	3552	1 C.C.R.B.	43.80				
			51.26				

UNIT AND TRANSFERS

ORIGINAL UNIT: 109th In

DATE ACCOUNT FIRST OPENED - 1/8/1916

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
BO. 1	5/12/17	1/1/18	Framway Coy

DAILY RATES OF PAY AND ALLOWANCES

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
18/1/19	2115	Trans.	7.46
7-2-19	3552	1 C.C.R.B.	43.80
			51.26

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
BO. 1	1.05	10	10	

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Apr	B'ce for'd								31 00		
	Ptes Pay	33		Apr a.s.P.				20			
				AR 75 Fram Co 5/4/18	4 46				35 97		
				" 121 " 17/4/18	3 57						
		33			8 03			20			
May	Ptes Pay	34 10		Can a.s.P.				20			
	Difference between Ptes & 2nd Cpls Pay from 11/5/18 to 2/5/18 21 Days @ 5.	1 05		AR 218 Fram Co 5/5/18	4 46						
				" 312 " 19/5/18	3 57						
		35 15			8 03			20	43 09		
June	L' Cpls Pay	34 50		Can a.s.P.				20			
				AR 418 Fram Co 5/6/18	3 57						
				" 573 " 18/6/18	4 46				49 56		
		34 50			8 03			20			
July	L' Cpls Pay	35 65		Can a.s.P.				20			
				AR 693 Fram Co 1/1/18	4 46						
				" 787 " 16/7/18	3 57				57 18		
		35 65			8 03			20			
Aug	P. a	35 65		b.a.p.				20			
				AR 936 Fram Co 3/8	3 57				69 26		
				4406 H.A. P.S. 28/8	1 78				67 48		
				1117 1st Drums 20/8	3 57				63 91		
		35 65			8 92			20			
Sept		34 50		b.a.p.				20			
				1259 1st Co. 19/9	3 57				74 84		
		34 50			3 57			20			
Oct		35 65		b.a.p.				20			
				1287 " 6/10	3 73				86 76		

Compiled by J. J. Cummings

Awarded M. M. D.O. 61, 8/8/18, 1st Drum C.S.

Proposed to Canada 28/2/19, Ref. 1 C.C.R.B. 11/18 70-3-2993
M.D. of Canada, Dept. 13-219-11587 (Accepted)

NUMBER

775147

RANK

Llc

NAME

FORREST

L.R.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Gal for	3565		Gal for	373			20	86 26		
				1363. 1 Tran Coy 18 9/16	373				83 03		
		3565			746			20			
Nov	Poa	3450		Cap				20	97 53		
				1688 . 20 1/16	1306				84 47		
	Difference x 9 pay 28 9/16 30 1/16	170							86 17		
Dec	Poa	3720		Cap				20	103 37		
				266 . 27 1/16	73				30 37		
				1780 . 27 1/16	466				25 71		
Jan		3720		Cap				20	142 91		
		11060			9072			60			
Feb.	Poa	3360		1964. ✓ 28/2/18	373				39 18		
				2016. ✓ 7-1-19	373				36 45		
				C. cap				20	49 05		
				2115. 1 trans. 18/4/19	746				41 64		
				3552. 10 C.B. 7-2-19	1380				221		
				6195. W. Lyt. 6-3-19	973				1194		
		3360			6845			20			

L.O. S. Canada 10-3-19 M.D. 2 S.A. 26 C.B.A.B.

WAR SERVICE BADGE CLASS A
OCCUPATIONAL GROUP
SERVICE GROUP

N **M.D.2**
SHORT FORM.
H
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

Young
Father
Father
A

W.S.B. 138658 pl.

1. No. 725147

2. Rank. 1st Lt.

3. Name. Forest, John R.

4. Unit. 1 P.E.R.B. 109 Bu

5. Date of Discharge MAR 21 1919 Place TORONTO ONT

6. Reason for Discharge.....
**GENERAL
 DEMOBILIZATION**

7. Authority. No. 2, D.D., Part II, D.O. No. 88

8. Proposed Residence after Discharge Woodville - Ont.

9. **CERTIFICATE TO BE SIGNED BY SOLDIER.**
 I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
 M. F. W.?
John R. Forest
 Signature of Soldier.

10. **CONFIRMATION.**
 The discharge of the above named man is hereby confirmed.
 Place. Emb'd Lv'pl - Celtic Mar 10 19
Deb'kd Halifax MAR. 18. 19
 Date. MAR 21 1919
 Signature John R. Forest
 (Co. C. Discharging Unit.)
 D.C. No. 2 District Depot.

amk.



REPORT FORM NO. 10
PROCEDURES ON DISCHARGE
E. 10-10-1919

1. Name	
2. Rank	
3. Grade	
4. Unit	
5. Date of Discharge	Nov 21 1919
6. Reason for Discharge	
7. Authority	U.S. Army, D.O. No. 100-100-100
8. Proposed Reentry after Discharge	
CERTIFICATE TO BE SIGNED BY SOLDIER	
I hereby acknowledge that as the undersigned and that I request my discharge and that	
CONFIRMATION	
The discharge of the above named man is hereby confirmed.	
Signed _____ Date _____	
Signed _____ Date _____	

GENERAL
DEMORALIZATION

TORONTO ONT

NOV 21 1919

Date of Discharge

Reason for Discharge

Authority

Proposed Reentry after Discharge

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that as the undersigned and that I request my discharge and that

CONFIRMATION

The discharge of the above named man is hereby confirmed.

Signed _____

Date _____

Date _____

Signed _____
Date _____

LIST OF DISCHARGE DOCUMENTS

Assistant Surgeon, Hospital	Medical Form W. 12
at Headquarters of Hospital	Medical Form W. 13
First Aid Certificate	Medical Form W. 14 or A. F. H. 12
Transfer Form	Medical Form W. 15 or A. F. H. 13
Form for Discharge	Medical Form W. 16
(Certificate from attending physician and other reports)	
Medical History Sheet	Medical Form W. 17 or A. F. H. 14
Proceedings of Medical Board	MEB. B. 1 or A. F. H. 15 or A. F. H. 16
Doctor History Sheet	Medical Form H. 18
Medical Report	ME. R. W. 1 or A. F. H. 17
Department Discharge Sheet	Medical Form H. 19
Company Discharge Sheet	Medical Form H. 20

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

2nd Co
1st Regt

Army

Steam

~~Cannons~~

~~Smith Cannons~~

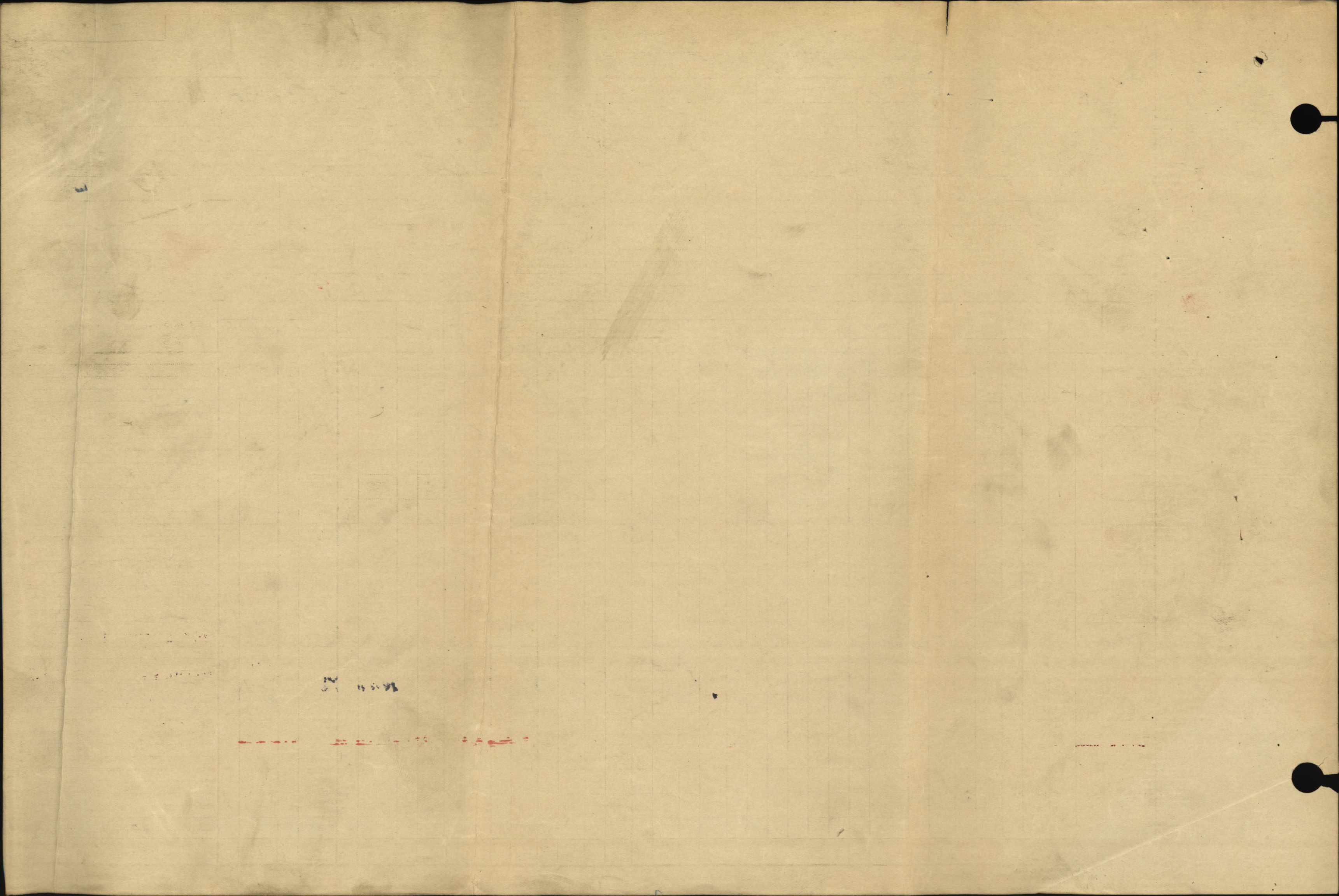
~~Range Takers~~

~~Serjeants~~

~~Corporals~~

~~Shoemkr, or Sh
Smiths~~

~~Cold shoers~~



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-10-17 A/B 30-4-18

Separation and Assigned Pay Branch

3973
3863

Aug 1-16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25		
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RATE OF ASSIGNMENT

20			
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6 L2 75 S.K.

PARTICULARS OF SEPARATION ALLOWANCE

No. 725147
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *J. R. Forest*
 Battalion *C. Co 109th Battn*
 Beneficiary *Mary M. Forest*
 Relationship *wid. mother*
 Address *Woodville Ontario.*

PARTICULARS OF ASSIGNMENT

Name *David Forest*
 Address *R. R. G. no 3, Woodville, Ont.*
 Change of Address
 1 *Mary M. Forest*
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31			340	340	SA to mother from 1-10-17 auth S/B 30-4-18
Jan	E 55859		20	20	Pay arrears at rate of \$40.00
Feb	F 95443		20	20	Transfer A/P to mother. 1-5-17
Mar	A 135287		20	20	
Apr	G 12564		20	20	
May	H 4962	65	20	85	PA 60 to adv SA. <i>From May mailed. 12-5-18</i>
June	M 22067	65	20	85	9% overpaid \$100.00 deduct 10% till absorbed now.
July	N 29426	65	20	85	See cheque for \$55.00 M.R.O. 56615
Aug	M 37425	65	20	85	Request slip no 2289 Credit slip 2501- for \$20
Sept	R 49074	65	20	85	\$10 in Dec & 10 in Jan 24/1/19
Oct	R 53614	65	20	85	(Credit slip) \$10 in Dec 6/13/19 2955
Nov	L 61953	65	20	85	2774 Request slip no 2868- #15 p 1-4-19
Dec					Credit " no 3984-10
Dec	V 66403	65	20	85	Leave no 7539 cancelled 10/12/18
Dec	Q 261	35	20	55	M.R.O. 12735
Jan	Q 74988	20	20	40	
Feb	U 81940	20	20	40	
Mar	L 84785	20	20	40	

M. F. W. 128
400M-6-17-1772-88-141
L.S. 22220-M. & D. 1493.

55
475
75

A/c Closed 3/3-19
 Ret'd per. *Culture*
 Date 8/3/19... F.X. 25/3/19.
 Clerk... *J. Mahan*
 M.O.-2 M.R.O.-82770

AUDITED



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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< C

M. F. W. 128
 400M-6-17-1772-39-1141
 L. L. 22320-M. & D. 7593.